



## APHIA II (AIDS, Population and Health Integrated Assistance Program), Health Communications and Marketing



Women in Malindi gather for Tunza Outreach where they receive family planning and cervical cancer screening.

**U.S. Presidential Initiative:**  
U.S. Global Health Initiative

**Funding Level:**  
\$36 million

**Duration:**  
March 2012 – March 2015

### Activity Goals:

- Increase access to and demand for high quality health products and services
- Improve adoption and maintenance of healthy behaviors through social behavior change communication
- Strengthen public private partnerships to deliver health communication, marketing and services
- Strengthen social marketing and behavior change communication with the public and private sector, and synchronize activities

### Activity Accomplishments:

- 413,000 Femiplan oral contraceptives sold / distributed in the past three months
- 3,000 clients received family planning services in the past three months
- Hotline tailored for family planning counseling and referrals
- 22,000 malaria nets distributed over the last three months
- 24 healthcare providers trained over the past three months on HIV counseling and

### ACTIVITY OVERVIEW

USAID/Kenya supports an integrated service delivery model to improve the health of Kenyans across the country. The AIDS, Population and Health Integrated Assistance Program, also known as APHIAplus, combines family planning, maternal/child health, malaria, nutrition, tuberculosis and HIV/AIDS prevention, care, and treatment services to provide an integrated, high-quality, equitable approach to sustainable services at the national, county, and community levels. Integrating these activities through one activity provides more effective communication and coordination with county health administrators. Seamless services and technical support at the local level ensure health workers address the unique needs of each geographic area across the country.

### ACTIVITY AREAS

APHIA II Health Communications and Marketing produces communications materials such as posters, fliers, media campaigns, messaging and discussion guides aimed at reducing risky actions and increasing healthy behavior. Some examples include:

- Abstinence and “be faithful” programs reaching vulnerable and at risk populations such as the *Chill Campaign*, which targets youth ages 10-14 years old the *Let’s talk Contraception* campaign targeted at 15 – 24 year old youth.
- Creation and production of “SIRI”, a 12-episode Kiswahili language TV series dramatizing a group of women sharing their reproductive health “secrets” so that they can become educated and make informed choices for themselves and their families with support from the men in their lives.
- Initiated the *Mpango wa Kando* campaign which encourages sexual partner reduction and use of condoms among married or cohabiting men & women to reduce the spread of HIV/AIDS.
- Increases condom distribution to high risk populations
- Promotes male circumcision services
- Created and distributed a Basic Care Package to reduce morbidity and mortality among persons living with HIV to help them live longer and healthier lives.
- Increases access to and uptake of private sector HIV and FP services through Tunza Family Health Network.

### ACTIVITY IMPACT

Eunice Muringi is a fifty-one-year old small-scale farmer and mother of five, her last born is 20-years-old. She has enjoyed good health for most of her life but experiences some occasional pelvic pain on her right side, especially after strenuous work. However, this did not bother her as it occurred once in a while.

- testing to strengthen their capacity
- Community activities that have led to prioritized community resource mapping, trainings, community small group and door-to-door activities

**Activity Locations:**

Nationwide

**Key Partners:**

Ministry of Health: National AIDS and STI Control Program, Division of Reproductive Health

Population Services International (PSI) / Kenya, Jhpiego, Safe Water & AIDS Project

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She had known Syphrosa Ngugi, the Tunza mobilizer (supported by USAID APHIA II Health Communications and Marketing) attached to Solea Medical Clinic from weekly women group meetings. It was at one of these meetings that she confided with Syphrosa about the occasional pain she was experiencing. Syphrosa encouraged Eunice to have a check-up at the facility, but Eunice did not see the need to do so until she experienced the death of a friend. One of her church mates Jane Wangui, fondly known to most as Mama Karo, died from cervical cancer, only three months after she was diagnosed.

That is when Eunice imagined herself in the same situation. "I would not want to have such an experience, if it can be avoided," she said. A month after the burial, Eunice went to the Tunza clinic where she was screened for cancer by the Tunza provider, Nancy Ikua. The results were suspicious for cancer. It took several counseling sessions at the clinic to convince Eunice about the importance of a referral to another facility to confirm the results. At the referral, she was diagnosed with Cervical Cancer stage IB. The best option was to remove the uterus. She underwent the surgery a month later and recovered.

Now Eunice is full of praise and appreciation that she detected and managed the cancer early. "I can't put in words how happy I am to be alive and well. I am thankful to Syphrosa, the Tunza mobilizer who encouraged me to go for the screening and Solea Medical Clinic for the counseling," she said.



*Eunice Muringi (wearing headband) receives counselling on cervical cancer treatment from Tunza provider Nancy Ikua.*